

## OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE 6000 DEFENSE PENTAGON WASHINGTON, DC 20301-6000

September 29, 1999

MEMORANDUM FOR SECRETARIES OF THE MILITARY DEPARTMENTS
CHAIRMAN OF THE JOINT CHIEFS OF STAFF
INSPECTOR GENERAL OF THE DEPARTMENT OF DEFENSE
DIRECTOR, ADMINISTRATION AND MANAGEMENT
DIRECTORS OF DEFENSE AGENCIES
DIRECTORS OF THE DOD FIELD ACTIVITIES

SUBJECT: Personnel Security Clearance Investigations

In his June 9, 1999, memorandum the Deputy Secretary directed the development and implementation of a plan to ensure that all active clearances/accesses are based upon a current investigation in accordance with national standards by the end of FY00. My memorandum of June 15, 1999, implemented the Deputy Secretary's tasking by directing a minimum number of additional periodic reinvestigations (over and above those already programmed) in FY99 to the Office of Personnel Management (OPM) for DoD civilian employees and all others to the Defense Security Service (DSS).

Beginning October 1, 1999, all investigations for DoD civilian personnel, except for overseas investigations, will be conducted by OPM. The DSS will conduct investigations for military personnel, for civilian personnel currently stationed overseas or who have been stationed overseas within the scope of the investigation, and for contractor personnel (Attachment 1). Instructions for processing civilian investigations to OPM are in Attachment 2.

For FY00, DoD Components are to provide funding for personnel security investigations conducted by OPM and DSS. This arrangement will be reviewed at the end of FY00 and each subsequent fiscal year until the periodic reinvestigation backlog is resolved.

In response to questions that have been raised about the status of fee for service for DSS, an explanation is at Attachment 3. Finally, Components are to continue to prioritize submission of their periodic reinvestigation backlog in accordance with the framework at Attachment 4.

I am committed to maintaining a viable and robust personnel security program. Ensuring that all DoD personnel with access to classified information and to other mission critical information and systems are and will remain reliable and trustworthy, is a mission critical requirement.

Arthur L. Money

Senior Civilian Official

Attachments



# Matrix for Submission of Investigative Requests

	ОРМ	DSS
DoD Civilians*	X	*Investigations for civilian personnel currently stationed overseas or who have been stationed overseas within the scope of the investigation are to be sent to DSS.
Military Personnel		x
Contractor Personnel		X

# Processing of Personnel Security Investigations for DoD Civilian Employees

WHO:

**DoD Civilian Employees** 

WHAT:

All investigations, except overseas investigations

(ANACI, Initial SSBI, SSBI-PR, Secret and Confidential PRs

(NACLC), SII, Public Trust).

HOW:

Submit SF86/SF85P (EPSQ printed paper form with signed releases), SF87 (Fingerprint Card), DD Form 1879 (which is to accompany SSBI, SSBI-PR and SII requests), and OPM required

information. (The EPSQ in its current configuration is not

compatible with the OPM case management process and cannot

be submitted electronically).

WHERE:

U.S. Office of Personnel Management

Federal Investigations Processing Center

P.O. Box 618

1137 Branchton Road Boyers, PA 16018-0618

WHEN:

Beginning October 1, 1999

#### COST:

	75 Day	Service	180	Day Service
Type of	Base	SPIN	Base	SPIN
Investigation	Expansion	Expansion	Expansion	Expansion
ANACI	<b>\$</b> 165	<b>\$54</b> 0		
NACLC	\$145	<b>\$</b> 520		
SSBI	\$2695	\$3070		
SSBI-PR			\$1795	\$2170

All issues will be resolved before a case is returned to the CAF based upon the DLT (base expansion). SPIN Expansion is based upon more in-depth issue resolution, i.e. confrontational interview of subject after initial SI. Prices reflect a range of a minimum charge to a maximum charge for a case. If a case is needed sooner, it will be considered on a case by case basis by calling the OPM Program Services Office at (724) 794-5612. A surcharge will be added to expedite the case. Components will be billed directly by OPM.

This form is to be attached to each Electronic Personnel Security Questionnaire (EPSQ) submitted to OPM for investigation. Note: The EPSQ is for internal DOD use only, and is pending OMB approval.

Investigation Coverage Level Actes Action Action  Geographic Location Code Title  Location of Official Personnel Folder NPRC At SON  None Other Address Zip Code  NPRC At SON  None Other Address Zip Code  At SOI NPRC At SOI NPI  None Other Address Zip Code  At SOI NPI  OAccounting Data and/or Agency Case Number		B <sub>Extra</sub>		C Sensitivity	Intermation D	E Nature of	F <sub>Date of</sub>	Month Day Year
Hostion   Position   Total   Position   Total   Personal Folder   None   Other Address   Zip Cod		Coverage		Level	Access	ł	Action	
Son   K   Location of Official   None   NPRC   At SON	OcoRtabute		H <sub>Position</sub>	IPO				
None   None   Other Address   Zip Code    L   M   Location of   Security Folder   None   Other Address   Zip Code    NOPAC-   At SOI   NPT    Name and Title   Signature   Telephone Number   Data    PRequesting Official   Signature   Telephone Number   Data    Official   Signature   Telephone Number   Data    Proportion   Signature   Telephone Number   Data    Official   Signature   Telephone Number    Official   Signature   Telephone Number   Data    Official   Signature   Telephone Number   Data    Official   Signature   Telephone Number    Official   Signature   Telephone Number   Data		K						Zip Code
L   M   Location of   Security Folder   None   Other Address   Zip Code    NoPAC.   LC Number   Date   Name and Title   Signature   Telephone Number    P   Requesting Official   Signature   Signature   Telephone Number    P   Requesting Official   Signature   Signature   OPM. Tormation will be used to obtain records in order to determine your suitability for employment. Please sign the ached sheet certifying the accuracy of the information you provided.  Subject of Investigation (Identifying Information)  LL NAME   Subject of Investigation (Identifying Information)  LL NAME   You have only initials in your name, use them and state (IO)   * If you are a "IR, "SR", "II", etc., enter this in the box after your middle name you have no middle name, enter "NMN"   * Name   Middle Name   Jr., II, etc.    Inden Name Used   Your maiden name and the "To and From" dates of when it was used.  Education Degree(s) (Not shown on the EPSQ)  OPM verifies highest degree obtained and degrees perfinent to the position for which this investigation is conducted. Please list education information below for those degrees beyond the 7 year period, not listed on your BRSQ. Use the number "2" in the Code block which perpress	1				4			
None   Other Address   Zip Code				ALSON				
NOPAC.  LC Number  Requesting Official  e following information is requested as part of your EPSQ for an investigative request being sent to OPM. Tornation will be used to obtain records in order to determine your suitability for employment. Please sign the acheed sheet certifying the accuracy of the information you provided.  Subject of Investigation (Identifying Information)  LL NAME  you have only initials in your name, use them and state (IO)  'If you are a "JR., "SR", "IT", stc., enter this in the box after your middle name you have no middle name, enter "NMN"  I Name  First Name  Middle Name  Jr., II, etc.  Education Degree(s) (Not shown on the EPSQ)  OPM verifies highest degree obtained and degrees pertinent to the position for which this investigation is conducted. Please list education information below for those degrees beyond the 7 year period, not listed on your EPSQ. Use the number "2" in the Code block which represe	L	M						Zip Code
Nopac.  LC Number  Proficial  Name and Title Official  Proficial  Proficial  Name and Title Official  Name and Title Official  Proficial  Name and Title Official  Proficial  Signature  Signature  Signature  Telephone Number ( )  Date ( )  OPM. To commation is requested as part of your EPSQ for an investigative request being sent to OPM. To commation will be used to obtain records in order to determine your suitability for employment. Please sign the acheed sheet certifying the accuracy of the information you provided.  Subject of Investigation (Identifying Information)  LL NAME  You have only initials in your name, use them and state (IO) Yelf you are a "IR., "SR", "II", etc., enter this in the box after your middle name you have no middle name, enter "NMN"  Name  First Name  Middle Name  Jr., II, etc.  iden Name Used your maiden name and the "To and From" dates of when it was used  iden Name  Education Degree(s) (Not shown on the EPSQ)  OPM verifies highest degree obtained and degrees pertinent to the position for which this investigation is conducted. Please list education information below for those degrees beyond the 7 year period, not listed on your EPSQ. Use the number "2" in the Code block which represent	SOI	Locado			-			
Proficial Name and Title Signature Telephone Number Date of following information is requested as part of your EPSQ for an investigative request being sent to OPM. To commation will be used to obtain records in order to determine your suitability for employment. Please sign the ached sheet certifying the accuracy of the information you provided.  Subject of Investigation (Identifying Information)  LL NAME you have only initials in your name, use them and state (IO) * If you are a "JR., "SR", "II", etc., enter this in the box after your middle name you have no middle name, enter "NMN"  Name First Name Middle Name Jr., II, etc.  iden Name Used  your maiden name and the "To and From" dates of when it was used  iden Name Month/Year Month/Year To  CPM verifies highest degree obtained and degrees pertinent to the position for which this investigation is conducted. Please list education information below for those degrees beyond the 7 year period, not listed on your EPSQ). Use the number "2" in the Code block which represe	N <sub>OPAC</sub>				Data and/or			
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# Instructions for Completing the SF-86 "Agency Use" Block

NOTE: Attached to this instruction sheet, are four examples of completed agency use blocks. The examples represent the four different case types that will be submitted. The instructions are a summary of the items that need completed on blocks A-P of the "Agency Use" portion of the SF 86. It represents a brief description only, any specific questions can be addressed by calling OPM-FIPC at (724) 794-5612.

A (Type of Investigation): Enter the appropriate 3-character code from the chart below representing the type of investigation and service requested. The first two digits represent the investigation type, and the third digit represents the investigation service.

Type of Investigation	35 Day Service	75 Day Service	120 Day Service	Reopen Service	150 Day Service	180 Day Service
SSBI		30B	30C	30D	in the second se	the second second
SSBI-PR		*		18D	Market Control	18 <b>F</b>
ANACI		09B		09D		والمهلا والمعافقة المرادي والمرادي والإنشار
NACLC		08B		: 08D	patrick and a second of the se	ogh at a second of the second of

<sup>\*</sup>Note: Any variation to the service noted above should be made by special request to OPM.

SSBI:

Single Scope Background Investigation

SSBI-PR:

Periodic Reinvestigation for Single Scope Background Investigation

ANACI:

Access National Agency Check with Inquiries

NACLC:

National Agency Check with Law and Credit

**B** (Extra Coverage): Enter the appropriate number of the numeric (1-7) and/or alphabetic (A-Z) codes from the chart below which represent the type of extra investigative coverage desired.

Chart codes:

O = Optional Coverage

S = Standard Coverage

N/A = Not Available

		Extra Coverage Codes										
Type of Investigation	1 Overseas	2 Credit	3 Advance NAC	4 Mgr/Spvy	5 Public Contact	6 Law Enforce- ment	7 Attach- ments	H INS	I Spouse INS	L BVS	R Reinvest- igation	Z Criminal Justice Position
SSBI	N/A	8	0	0	0	0	0	S	S	0	0	0
SSBI-PR	N/A	S	0_	O	0	0	0	S	S	ō	Ö	0
ANACI	N/A	S	0	N/A	N/A	N/A	0	0	N/A	ŏ	ŏ	۱ŏ
NACLC	N/A	S	0	N/A	N/A	N/A	O	0	N/A	0	O	0

Code 1 (Overseas-Subject and Spouse): Not available

Code 2 (Credit): Automated scheduling of Credit happens automatically with these case types, no code is necessary.

Code 3 (Advance NAC): The Advance on the National Agency Checks (NAC) consists of an itemized list of NAC results and or search status. This is notification of item results only, no hardcopy furnished. The

Advance NAC Report is sent to the SOI and is available for all case types. If after 30 days from the scheduling date, the NAC(s) are not complete, a NAC Status report will be generated to provide the SOI information on the required NAC items. Place code "3" in Block "B" for this coverage. For more information and sample copies of the reports, contact OPM-FIPC.

Code 4 (Managerial and Supervisory)
Code 5 (Public Contact)
Code 6 (Law Enforcement)

These codes print instructions to the investigators on the Case Assignment Transmittal (CAT) to provide additional coverage for positions requiring these duties. The extra coverage is specified in the Extra Coverage Section of the Investigator's Handbook. An additional \$100 surcharge is added to the case cost for this coverage. Place extra coverage code of "4, 5, or 6" in Block B for this coverage.

Code 7 (Attachments): When information is attached to the investigative request, such as:

Request for license or certificate verification

Issue(s) information

Personnel folder or security file information

Special handling instructions

Any other information pertinent to the investigation

Place code "7" in Block B to indicate an attachment to the investigation.

Code H (INS): Automated scheduling of the Immigration and Naturalization Search. Place code "H" in Block B for this coverage.

Code I (Spouse INS): Automated scheduling of the Immigration and Naturalization Search for the subject of investigations' spouse. Place code "I" in Block B to request this coverage.

Code L (BVS): Automated scheduling of the Birth Verification at State BVS. Place code "L" in Block B to request this coverage.

Code R (Reinvestigation): This code by-passes the administrative edits resident in PIPS that requires the appropriate level of case type/sensitivity/access. Place code "R" in Block B to indicate a reinvestigation.

Code Z (Criminal Justice Position): This identifies a Criminal Justice Position that are exempt from the FBI user fees. Place code "Z" in Block B if the subject is in a Criminal Justice Position.

C Sensitivity Level: In the first space, enter one of the following codes representing the sensitivity level of the position requiring the investigation:

CODE	LEVEL
2	Noncritical-Sensitive
3	Critical-Sensitive
4	Special-Sensitive

Enter "C" in the second space for an ADP-Computer position. If not an ADP-Computer position, leave the block blank.

Access Level: Enter the appropriate code from the chart below to show the type of security clearance/access the position requires.

CODE	LEVEL
0	Not Required
1	Confidential (Executive Order 12968)
2	Secret (Executive Order 12968)
3	Top Secret (Executive Order 12968)
4	Sensitive Compartmented Information (DCID 1/14)
5	Q-Sensitive (Atomic Energy Act)
6	Q-Non-Sensitive (Atomic Energy Act)
7	L (Atomic Energy Act)
8	Other (specify other security clearance under extra coverage Item B. Code 7)

E Nature of Action Code: If the person being investigated is a Federal employee or applicant, enter the 3 digit code showing the Nature of Action taken or to be taken for the position requiring the investigation (the same action code as used on the SF-52). If your agency did not use FPM Supplement 296-33 coding, enter "000". If the person being investigated is a contract employee, enter "CON".

F Date of Action: Enter the effective date (Month/Day/Year) of the action requiring the investigation. If the action has not been taken, leave the block blank.

Geographic Location: enter the 9-digit "Worldwide Geographic Location Code", showing the actual location of the duty station for the position. The Geographic Location Code is an OPM Central Personnel Data File (CPDF) requirement that must be entered on the SF-52 and SF-50 for certain personnel actions. This is a GSA Publication (4/87). If unknown, leave the block blank.

H Position Code: Enter the appropriate alphabetic code from the chart below. If none of the codes apply, leave the block blank.

CODE	<u>POSITION</u>	CODE	POSITION
Α	Congressional Staff	E	White House
В	Investigator	F	SES/15 (or equivalent)
C	Astronaut	G	Special/Confidential Assistants
D	Fellow Programs	4	(GS/13 and above)
		Н	Child Care Provider

I Position Title: Enter the title of the position for which the investigation is being requested. If the person being investigated is a contractor employee, enter the person's position with the contractor company, or "CON".

J SON: Enter the 4 character Submitting Office Number (SON); if the Security Office is the Submitting Office, enter the Security Office Identifier (SOI) code.

# K Location of Official Personnel Folder: Check the correct box that gives us the location of the OPF.

NONE: If the person has never been a Federal employee

NPRC: If the OPF is at the National Personnel Records Center

AT SON: If the OPF is at the Submitting Office

OTHER ADDRESS: If the OPF is at any other location (for example, the SOI), furnish the

address.

L SOI: Enter the 4 character Security Office Identifer (SOI). Submitting Offices should contact their Security Office to determine the correct SOI.

M Location of Security Folder: Check the correct box that identifies the location of the Security folder.

NONE: If there is no security file at your agency

AT SOI: If there is a security file at your agency, and it should be reviewed.

NPI: If there is a security file at your agency, but it contains no pertinent information.

OTHER ADDRESS: If your agency's security file should be reviewed and it is not at the

SOI, furnish the address.

N OPAC-ALC Number (On-Line Payment and Collection Agency Location Code): Enter your agency's OPAC-ALC number that records the billing information. OPM's process uses the OPAC billing system, which utilizes the ALC number, issued to each agency for this purpose by the Department of Treasury. Under this system, a transfer of funds is made by the Department of Treasury from the account of the requesting agency to the account of OPM. Contact OPM-FIPC for additional billing information.

O Accounting Data: You may enter your agency data for internal use (internal case number, file number, etc.). Up to 25 characters may be entered in this block. The information you enter will be printed on documents used to close the case to your agency. If your agency does not need this information, leave the block blank.

P Requesting Official: Enter the name, title, and signature of official requesting the investigation; the date, and the commercial telephone number, including area code. This is the person OPM will contact concerning specific case related submission problems.

Type of B Ex					DOD use onl	ly, and is pe	nding OMB	bmitted to C approval.	PIVI TOP
Type of B Ex		Agenc	y Use I1	ıform	ation (SI	F 85P)			
	ira nverage	C	Sensitivity/R	isk ]	O Compt/	E Nature Action	i	F Date of Action	Month Day Y
Geographic Location	H Po		I Pos						
SON	K Location of Official Personnel Foldo		None NPRC At SON	Other A	ddress			7.ip Co	rde
SOI	M Location Security Folder	of	None At SOI NPI	Other A	uldress			Zip Co	ode
OPAC-ALC Number		0	Accounting 1	Data and/o	x Agenoy Case	Number			
Requesting Official	e		Signature				Telephone Nu	mber	Date
LL NAME you have only initials in your you have no middle name, on st Name		and state (IC		u are a "J	R., "SR", "II", o	tc., enter this i		your middle nan	ne Jr., II, etc.
FHER NAMES USED to other names you used and the kname(s). If the other name is					naiden name, na	ime(s) by a for	mer marriage, f	ormer names(s)	, alias(es), or
Namo		Мо	nth/Year Mor To	th/Year	Name #3			Month/Y	car Month/Year To
Name		Mo	nth/Year Mon To	th/Year	Name #4			Month/Y	ear Month/Year To
OPM verifies highest definformation below for the represents College/University Month/Year #1 To Street Address and City (	gree obtained at ose degrees bey ersity/Military ( Code Na	nd degrees yond the 7 College. ame of Sch	pertinent to year period,	the positi		his investiga	tion is conduc ımber "2" in t	the Code block	
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Month/Year #2 To	Code Na	me of Sch	1001		į.	Degree/Dipl	oma/Other	Month/Yes	ar Awarded

# Instructions for Completing the SF-85P "Agency Use" Block

A Type of		
Investigation	 	

Enter the appropriate 3-character code from the chart below which represents the type of investigation and service requested. The first two digits represent the investigation type, and the third digit represents the investigation service.

Type of Investigation	35 Day Service	75 Day Service	120 Day Service	Reopen Service	150 Day Service	180 Day Service
SSBI	The second of th	30B	30C	30D		
SSBI-PR	production of the second		da vara da	18D		18F
NACI		02B		02D	77 1 20 20 20 20 20 20 20 20 20 20 20 20 20	
NAC	06A	A part of the Control				

Note: Any variation to the service noted above should be made by special request to OPM.

SSBI:

Single Scope Background Investigation

SSBI-PR:

Periodic Reinvestigation for Single Scope Background Investigation

NACI:

National Agency Check with Inquiries

NAC:

National Agency Check

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R FXA9		
A		
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Enter the appropriate number of the numeric (1-7) and/or alphabetic (A-Z) codes from the chart below which represent the type of extra investigative coverage desired.

Chart codes:

O = Optional Coverage

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	Extra Coverage Codes											
Type of Investigation	l Overseas	2 Credit	Advance NAC	4 Mgr/Spvy	5 Public Contact	6 Law Enforce- ment	7 Attach- ments	H INS	I Spouse INS	L BVS	R Reinvest- igation	Z Criminal Justice Position
SSBI	N/A	S	0	0	0	0	0	S	0	0	0	0
SSBI-PR	N/A	3	0	U	U	0	U	8	0	0	Ū	l ŏ
NACI	NA	S	0	N/A	N/A	N/A	0	0	0	0	0	0
NAC	N/A	0	0	N/A	N/A	N/A	0	0	0	0	0	Ö

Code 1 (Overseas-Subject and Spouse): Not available

Code 2 (Credit): Automated scheduling of Credit, if needed for the NAC, place code 2 in the extra coverage block.

Code 3 (Advance NAC): The Advance on the National Agency Checks (NAC) consists of an itemized list of the NAC results and or search status. This is notification of item results only, no hardcopy furnished. The Advance NAC Report is sent to the SOI and is available for all case types. If after 30 days from the scheduling date, the NAC(s) are not complete, a NAC Status report will be generated to provide the SOI information on the required NAC items. Place code "3" in Block "B" for this coverage. For more information and sample copies of the reports, contact OPM-FIPC.

Code 4 (Managerial and Supervisory)

Code 5 (Public Contact)

Code 6 (Law Enforcement)

These codes print instructions to the investigators on the Case Assignment Transmittal (CAT) to provide additional coverage for positions requiring these duties. The extra coverage is specified in the Extra Coverage Section of the Investigator's Handbook.

An additional \$100 surcharge is added to the case cost for this coverage. Place extra coverage code of "4, 5, or 6" in Block B for this coverage.

Code 7 (Attachments): When information is attached to the investigative request, such as:

Request for license or certificate verification

Issue(s) information

Personnel folder or security file information

Special handling instructions

Any other information pertinent to the investigation

Place code "7" in Block B to indicate an attachment to the investigation.

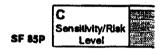
Code H (INS): Automated scheduling of the Immigration and Naturalization Search. Place code "H" In Block B for this coverage.

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Code R (Reinvestigation): This code by-passes the administrative edits resident in PIPS that requires the appropriate level of case type/sensitivity/access. Place code "R" in Block B to indicate a reinvestigation.

Code Z (Criminal Justice Position): This identifies a Criminal Justice Position that are exempt from the FBI user fees. Place code "Z" in Block B if the subject is in a Criminal Justice Position.

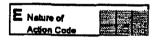


Enter one of the following codes representing the Sensitivity/Risk level of the position requiring the investigation:

CODE	LEVEL
2	Noncritical-Sensitive
3	Critical-Sensitive
4	Special-Sensitive
5	Moderate Risk
6	High Risk

SF 85P D Compu/

Enter "C" in this block is investigation is for an ADP-Computer position. If not an ADP-Computer position, leave the block blank,



If the person being investigated is a Federal employee or applicant, enter the 3 digit code showing the Nature of Action taken or to be taken for the position requiring the investigation (the same action code as used on the SF-52). If your agency did not use FPM Supplement 296-33 coding, enter "000". If the person being investigated is a contract employee, enter "CON".



Enter the effective date (Month/Day/Year) of the action requiring the investigation. If the action has not been taken, leave the block blank.



enter the 9-digit "Worldwide Geographic Location Code", showing the actual location of the duty station for the position. The Geographic Location Code is an OPM Central Personnel Data File (CPDF) requirement that must be entered on the SF-52 and SF-50 for certain personnel actions. This is a GSA Publication (4/87). If unknown, leave the block blank.

H Position Code

Enter the appropriate alphabetic code from the chart below. If none of the codes apply, leave the block blank.

POSITION	CODE	POSITION
Congressional Staff	E	White House
Investigator	F	SES/15 (or equivalent)
Astronaut	G	Special/Confidential Assistants
Fellow Programs	(GS	S/13 and above)
	н	Child Care Provider
	Congressional Staff Investigator Astronaut	Congressional Staff E Investigator F Astronaut G Fellow Programs (GS

I Position		
Title	_	#15000000000000000000000000000000000000

Enter the title of the position for which the investigation is being requested. If the person being investigated is a contractor employee, enter the person's position with the contractor company, or "CON".

		 	****
•	<b>4</b>	 	<b>4</b>

Enter the 4 character Submitting Office Number (SON); if the Security Office is the Submitting Office, enter the Security Office Identifier (SOI) code.

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Check the correct box that gives us the location of the OPF.

NONE: If the person has never been a Federal employee NPRC: If the OPF is at the National Personnel Records Center

AT SON: If the OPF is at the Submitting Office

OTHER ADDRESS: If the OPF is at any other location (for example, the SOI), furnish the address.



Enter the 4 character Security Office Identifer (SOI). Submitting Offices should contact their Security Office to determine the correct SOI.

M Location	Note: Office/Office (1986)
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#### Check one box only.

Check the correct box that identifies the location of the Security folder

NONE: If there is no security file at your agency

AT SOI: If there is a security file at your agency, and it should be reviewed.

NPI: If there is a security file at your agency, but it contains no pertinent information. OTHER ADDRESS: If your agency's security file should be reviewed and it is not at the

SOI, furnish the address.



On-Line Payment and Collection Agency Location Code): Enter your agency's OPAC-ALC number that records the billing information. OPM's process uses the OPAC billing system, which utilizes the ALC number, issued to each agency for this purpose by the Department of Treasury. Under this system, a transfer of funds is made by the Department of Treasury from the account of the requesting agency to the account of OPM. Contact OPM-FIPC for additional billing information.

	<del></del>
O Accounting Data and/or	
Agency Case Number	

You may enter your agency data for internal use (internal case number, file number, etc.). Up to 25 characters may be entered in this block. The information you enter will be printed on documents used to close the case to your agency. If your agency does not need this information, leave the block blank.

P Requesting	Springs Manher Con Date
Official	

Enter the name, title, and signature of official requesting the investigation; the date; and the commercial telephone number, including area code. This is the person OPM will contact concerning specific case related submission problems.

## SF 85P ACCEPT GUIDELINES

Items Required for Investigation Processing Revised 05/96

			K641260 03/40
ITEM	ACCEPT INCOMPLETE	DATA REQUIRED	CONSIDERATIONS
A. Type of Investigation		х	Three digit code which represents the type of investigation and service requested.
B. Extra Coverage	x		Needed only when extra coverage is requested.
C. Sensitivity/Risk Level		X	Code representing the level of the position requiring the investigation
D. Computer/ADP	x		
E. Nature of Action	х		Obtained by Suitability Adjudication Branch (SAB) if needed for Adjudication.
F. Date of Action	Х		Obtained by SAB if needed for Adjudication.
G. Geographic Location	Х		
H. Position Code	х		
I. Position Title		X	Take from Fingerprint chart; if not shown, reject.
J. SON		Х	Enter the 4 character code representing the Submitting Office.
K. Location of OPF	х		If first time Federal employee check "none"; if at National Personnel Records Center (former fed with break in service) check NPRC; if at SON check SON; check "other" and show the agency name and address if the OPF is at some other location (transfer situation).
L. SOI		X	Enter the 4 character code representing the Security Office Indicator.
M. Location of Security Folder		X	If there is no Security File check "none"; if the Security file is at the SOI and should be reviewed by an OPM investigator check "SOI"; if the Security File is at your agency and it contains no pertinent information check "NPI"; or check "other" and show the agency nam and address if the Security File is maintained at some other location and needs to be reviewed by an investigator.  NAC/NACI assume at SOI if incomplete.
N. OPAC-ALC Number	X		Supply Agency Location Code (ALC) assigned by Treasury used in the On-Line Payment and Collection (OPAC) billing system.
O. Accounting Data	Х		, constant (constant of constant of consta
P. Requesting Official			Accept incomplete on NAC/NACI, signature required for all others. FIPC will contact this person to obtain information or to clarify discrepancies prior to scheduling investigation. The requesting official cannot be the subject of the investigation.
I. Name - Last		Х	Reject if spelling is discrepant or name not shown.
- First			Reject if spelling is discrepant or name not shown.
- Middle			Reject if spelling is discrepant, none shown, or initials only.
2. DOB			Reject if discrepant or not shown.
B. POB - City/County			City or County required.
- State/Country		Х	State or Country required.
. SSN			Reject if discrepant with that of the other forms or not shown.
. Other Names Used		X	Required if papers indicate presence of another name. Last, First and Middle Name (if different than provided in # 1) required.
. Other Identifying Info		2	Can be obtained from other forms; if not shown, reject.

ITEM	ACCEPT INCOMPLETE	DATA REQUIRED	CONSIDERATIONS
Telephone Numbers		Х	PRI/MBI/LBI/BI/SBI need 1 phone number. NAC/NACI accept incomplete.
8a. Citizenship		Х	If country of birth is shown as non-USA, one block must be checked.
b. Mother's Maiden		х	Required if "L" is present in Extra Coverage.
c. US Citizenship		х	Required if "Citizen not by birth" is marked or if "H" is present in extra coverage. Need either Naturalized or Citizenship Certificate, Passport, or Form 240 information (dates: month and year required).
d. Dual Citizenship	X		,
e. Alien		х	Required if subject is not a US Citizen. Subject should supply City, State, Date of Entry (year only), Registration Number, and Country.
9. Where You Have Lived		Х	PRI/MBI/LBI/BI requires 7 years with gaps of no more than 2 months. SBI requires 10 years with gaps of no more than 2 months. NAC/NACI requires 5 years with gaps of no more than 6 months. Residence dates require month & year during the coverage period. Residence contacts not required.
10. Where You Went To School		х	All education within the last 5 years (SBI requires 10 years) and most recent degree earned must be shown. To & from dates of attendance (month & year during coverage period), complete school name, mailing address, and date of degree (year only) required.
11. Employment Activities		х	PRI/MBI/LBI/BI requires 7 years with gaps of no more than 2 months. SBI requires 10 years with gaps of no more than 2 months. NAC/NACI requires 5 years with gaps of no more than 3 months. Employment dates require month & year. Need complete name and mailing address of employer including street addresses & zip codes.
12. Employment Record		х	PRI/MBI/LBI/BI/SBI accept incomplete; unanswered questions are shown as "issues" for investigator resolution. NACI's require full information within coverage period. NAC's accept incomplete.
13. People Who Know You Well		Х	Accept incomplete NAC/MBI/PRI/LBI/BI/SBI. NACI's must have two names with complete US addresses.
14. Marital Status		х	Marital Status block must be checked. If "Married", current spouse name is required.
15. Relatives	·	Х	Return LBI/BI/SBI if completely unanswered. Information not required on NAC/NACI/MBI/PRI.
16. Military History	`	х	a. First question requires response (Merchant Marine question accepted if blank). Military information required if 16a is answered "yes". Month & year required on SBI's and during 15 year coverage period for all other case types all.
17. Selective Service Record		Х	If subject is male, 17a requires answer. If "yes", 17b requires completion.
18. Investigation Record	·		PRI/MBI/LBI/BI/SBI accept incomplete; unanswered questions are listed as "issues" for investigator resolution. Full information required within NACI coverage period. NAC's accept incomplete.
19. Foreign Countries You Have Visited		Х	If information present, must have country visited and dates (month & year).

ITEM	ACCEPT INCOMPLETE	DATA REQUIRED	CONSIDERATIONS
20, 21a, 21b, 22a & 22b		х	PRI/MBI/LBI/BI/SBI accept incomplete; unanswered questions are listed as "issues" for investigator resolution. NACI's require all information requested during the coverage period. NAC's accept incomplete.
Certification		Х	Subject must sign and date page 7. Date must be within 120 days of receipt at FIPC.
Authorization For Release	·	х	Subject must sign and date page 8. If unsigned or altered in any way, a phone call will be placed to the SOI for a decision on the scheduling of the case.
Amendments/changes to SF 85P		х	Amendments must be initialed and dated.
Zip Code Requirements		х	A case-by-case determination will be made if an investigation is to be returned for missing ZIP Codes.

SF 85P-S (Supplemental Questionnaire for Selected Positions)

ITEM	ACCEPT INCOMPLETE	DATA REQUIRED	CONSIDERATIONS
Full Name		Х	Reject if spelling is discrepant with other forms.
SSN		X	Reject if discrepant with that of the other forms.
3, 4, 5		х	PRI/MBI/LBI/BI/SBI accept incomplete; unanswered questions are listed as "issues" for investigator resolution. Full information required during the coverage period for NACI's. NAC's accept incomplete. If question # 5 (Medical Record) is answered "Yes", subject should complete the specific release for medical information, if not supplied, will be obtained by investigator.
Certification		Х	Subject must sign and date.
Amendments/changes to SF 85PS		Х	Amendments are to be initialed and dated.

## OF 306 (Declaration of Federal Employment) Accept Guidelines\*

ITEM	ACCEPT INCOMPLETE	DATA REQUIRED	CONSIDERATIONS		
Full Name		х	Reject if spelling is discrepant with other forms.		
Military Service		Х	Question 7 must show type of discharge and date (month/year).		
Background Information		Х	Questions 8 through 12. All positive responses require complete details in #15.		
Signature		Х	OF 306 must be signed by the subject.		
OF 306 Amendments/changes	X		Amendments are to be initialed and dated.		
OF 306 Attachments	х		The agency should ask the subject to sign and certify the accuracy of all the information in the application/resume.		

## APPLICATION/RESUME ACCEPT GUIDELINES\*

ITEM	ACCEPT INCOMPLETE	DATA REQUIRED	CONSIDERATIONS	
Name		X	Reject if spelling is discrepant with other forms.	
Signature	х		The agency should ask the subject to sign and certify the accuracy of all the information in the application/resume.	
dments/changes to resume or application	x		Amendments/changes are to be initialed and dated.	

<sup>\*</sup>Federal employee appointment actions: a copy of the application materials, related appointment documents, OF 306, with any attachments used for the appointment, is to be referred with the investigative request. Contractor positions are not required to submit an application or resume. Contractor positions require the following items completed from the OF 306: 1,7,8,9,10,11,12,15, and 16a. The OF 306 may be used or same questions addressed on an attachment with those items answered.

NOTE: FIPC reserves the right to return egregious cases which are missing substantial amounts of information across the board.

## Explanation Regarding the Status of "Fee for Service"

## Background:

The DSS Defense Working Capital Fund (DWCF) Charter

established DSS as a DWCF Activity Group effective

October 1, 1998 under the authority of Title 10, United States Code, Section 2208. DSS began operating in the DWCF on a reimbursable basis in FY99. Full implementation of fee for service would begin in FY00.

#### Current Status:

Full implementation of fee for service has been delayed. DSS will continue to operate in the DWCF and service-level billings are to continue in FY00, FY01, and FY02. DSS in consultation with USD(C) and ASD(C31) is to reevaluate implementation of full fee for service and provide recommendations to the Deputy Secretary of Defense by May 1, 2000.

### What does this mean?

DoD Components will continue to finance DSS on a reimbursable basis in FY00 through FY02 and are to use, as a minimum, the money devolved to them for payment of fees for DSS and/or OPM services. Essentially, DoD Components are to send the devolved money to DSS and/or OPM as applicable via MIPR or other funding documents.

Additional guidance for budgeting will be issued in PBD 434 or other directives.

# INSTRUMENT FOR PRIORITIZING PERIODIC REINVESTIGATIONS

Instructions: This instrument provides a tool for prioritizing overdue periodic reinvestigations (PR). The instrument is intended to provide guidance and is not intended to be a substitute for the expertise and judgment of the commander, organizational head or local security official. Security managers and special security officers should complete this instrument for each overdue reinvestigation under their cognizance by placing a check in the appropriate YES or NO box for each screening question below. In general, the higher the number of YES responses, the higher priority for the PR. Prioritize cases separately by two groups: (1) Top Secret/SCI and (2) Secret/Confidential. Reinvestigations within each clearance level should be submitted for processing in priority order.

	SCREENING QUESTIONS	NO	YES
1.	Does the subject work with classified information from multiple programs, projects, or SCI compartments? (Count each program or compartment and enter the total (number) in the YES column, e.g. "5" would count as 5 YES responses for this question.)		
2.	Does the subject have access to Sensitive Compartmented Information (SCI)?		
3.	Is the subject assigned to a sensitive program (e.g., Special Access Program, Presidential Support, Personnel Reliability Program)?		
4.	Does the subject work with classified information at least weekly?		
5.	Since the last investigation has the subject been arrested for, charged with or convicted of any criminal offense (including those under the Uniform Code of Military Justice)?		
6.	Since the last investigation has the subject filed for bankruptcy, had wages garnished, property repossessed, been encumbered by a lien for not paying taxes or debts, or had delinquent debts over 180 days past due?		
7.	Since the last investigation has the subject been formally reprimanded, been suspended or otherwise subject to adverse personnel action for any reason, to include a security violation at work?		
8.	Do the subject's duties involve access to cryptologic systems or equipment; weapons of mass destruction; advanced weapons technology; covert intelligence operations, technology or specialized national intelligence collection systems; or sensitive drug interdiction information?		
9.	Is the subject a system administrator for a mission critical information system?		
10.	Since the last investigation or reinvestigation, have more than 7 years passed for subjects with access to TS/SCI/SAP or other special programs; 12 years for subjects with a SECRET clearance; or 17 years for subjects with a CONFIDENTIAL clearance?		
11.	Would this reinvestigation be the subject's first PR?		

Attachment 4 September 1999